



PROVIDER REPORT FOR

**Autism Services Association
47 Walnut St Bld #1
Wellesley, MA 02482**

October 22, 2014

Version

Provider Web Report

**Prepared by the Department of Developmental Services
OFFICE OF QUALITY ENHANCEMENT**

SUMMARY OF OVERALL FINDINGS

Provider	Autism Services Association
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Review Dates	9/17/2014 - 9/18/2014
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Service Enhancement Meeting Date	9/30/2014
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Survey Team	Raymond Edi-Osagie Cheryl Hampton (TL)
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Survey scope and findings for Employment and Day Supports					
Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Employment and Day Supports	1 location(s) 3 audit (s)	Targeted Review	DDS 13 / 13 Provider 47 / 49 60 / 62 2 Year License 09/30/2014 - 09/30/2016		
Community Based Day Services	1 location(s) 3 audit (s)			Deemed	

Survey scope and findings for Planning and Quality Management					
Service Group Type	Sample Size	Scope	Licensure Level	Certification Scope	Certification Level
Planning and Quality Management	N/A	N/A	N/A	Deemed	0/0 Certified

EXECUTIVE SUMMARY:

Autism Services Association (ASA) is a non-profit agency founded in 1963 that provides Community Based Day Supports (CBDS) and day habilitation services to 80 individuals with autism and/or intellectual disabilities. The agency's focus continues to be community integration, vocational training and employment. For the purpose of this DDS Licensing review, the agency conducted its own self-assessment of the services it provides to approximately 80 individuals within community based day supports; and, conducted a DDS Targeted Review that consisted of three audits of the eight critical indicators and the five indicators that were not met in the previous survey (September, 2012).

The agency continues to support people to build upon and enhance vocational skills, secure work opportunities in the community and to develop additional work skills and maximize potential. Depending on individuals' interests and desires, the agency continues to provide job coaches to support individuals who continue to work at various jobs in the community including ASA's janitorial crew, Meals on Wheels and food delivery at a nursing facility. Staff conveyed that on average, individuals are working at least three hours per day at the location of their choice. Those individuals who split their time between the Day Habilitation and Community Based Day Service are also afforded the same opportunities if desired. The agency continues to use an outcome based measurement process to assess the effectiveness of the agency programmatically. This information is also utilized for program development and strategic planning. The agency's Board of Directors reviews the findings annually; and, these findings are also submitted to CARF. It was conveyed the Executive Director will retire sometime in 2015, and the agency is in the process of succession planning.

The findings of the DDS Targeted Review confirmed that effective systems were in place to safeguard and support individuals. The agency received a Met in all of the eight critical indicators as well as the five additional licensing indicators that received a Not Met during the previous Licensing survey. There were several examples of the systems that are in place to safeguard and protect individuals. People were assessed regarding their use of equipment and or machinery safely. Also, for those individuals taking behavior modifying medications requiring Rogers Monitors, the Rogers medication and treatment plans were current and available for review. Additionally, agency staff were knowledgeable regarding their responsibility to develop medication and treatment plans for those individuals who take behavior modifying medications administered at the CBDS location regardless of Rogers Monitor status. Furthermore, the informed consent form was revised to reflect specific situations where consent for a photo release would be warranted. In the area of skill development, everyone reviewed had production goals. Although the goals were measurable and people's production and attendance was reported on, the monthly progress notes did not comment on other elements mentioned in the support strategy agreement. Agency staff need to explore ways to incorporate specific skills individuals are good at doing when engaging in a particular job as well as areas warranting further refinement if applicable. DDS found the indicator regarding informed consent to be Met; however, the agency findings warranted a Not Met. The agency anticipates that all consents will be up to date by next year. Although compliance with DDS requirements for Emergency Fact Sheets and data maintenance was not part of the DDS Targeted Review, the agency's own self-assessment found examples where documentation and information needed to be updated and ASA is currently in the process of revising behavior data sheets to reflect data collection and its effectiveness of implementation of behavior support plans.

In summary, as a result of the combined rating of the self-assessment performed by Autism Services Association and the Targeted Review performed by DDS, the agency received a Two-Year License for its Community Based Day Support service with a score of 97% of the licensing indicators having been Met. Since the agency received scores above 90%, it will conduct its own follow-up and report its findings to DDS within 60 days of the Service Enhancement Meeting. The agency's Self-

Assessment follows this Executive Summary.

Description of Self-Assessment Process:

Autism Services Association has been in operation for over fifty one year's dedicating to serving young adults and adults with autism in community employment and community integration programs. The typical problems addressed through our agency include the following: What activities or vocational experiences can the individual participate in to enhance vocational development and placement? What work skills and supports are needed to foster increased productivity and placement in supported employment? What learning styles are most beneficial for individual development? Which jobsites and placements most match the individual's needs and potential? Our agency is also involved in providing self-help development, sensory motor development, communication development, social development, independent living development, affective development and behavioral development.

In keeping with the above, our agency's self-assessment process is linked to our outcome measurement and program enhancement process. This outcome measurement process defines program indicators of goal attainment and success and provides implications for program development and strategic planning. Our self-assessment program indicators include the following: 1). How many individuals are working in the community, 2) How many hours are individuals working in the community, 3) Percentage of individuals in community based jobs, 4) Number of days placed in community jobs, 5) Number of hours placed in community jobs, 6) Increase of earnings in community jobs, 7) Maximize number of participants in program, 8) Minimize time for referral to start date, 9) Maximize participants in the community.

The results of the above performance indicators are collected and published quarterly and are reviewed and analyzed semi-annually and presented to our board of directors annually. They are also submitted to our national CARF accreditation. The results of these self-assessment indicators also have implications for our agencies strategic planning documents for future planning and development, both programmatically and administratively. These indicators demonstrate how program goals are being met for individuals served and are directly related to their individual goals and objectives within their individual service/support/program plans.

In addition our own self-assessment of these indicators, we have a national CARF accreditation which reviews these indicators of outcomes and program evaluation, a state certification process and an annual independent financial audit which includes a program review of program goals and objectives. In addition, on an annual basis, we ask for input by way of a satisfaction survey from various stakeholders including individuals, staff, families, residential providers, employers, state and local referral agencies, and other agencies. The results are mailed to all stakeholders and are posted on our webpage to ensure transparency and are reviewed with our board of directors. Suggestions and recommendations are incorporated into program planning, strategic planning and administrative decision making.

ASA has an approved two- year safety plan, which includes emergency evacuation procedures as well as all emergency fire and safety equipment. ASA has multiple safety evacuation drills including; fire, natural disaster, utility, weapons, behavioral, medical, bomb threat, transportation, mail, etc. ASA performs safety self-inspections which include hot water, inspection of heating equipment, exits free from obstruction, etc. The fire department inspects the building on a quarterly basis and all fire extinguishers are inspected. ASA has staff who are MAP certified, an RN, trainer in Proactive Alternative for Change, Positive Behavior Supports and a Training/Safety Coordinator. ASA has a two week orientation training schedule and ASA conducts monthly trainings that include first aid, CPR, PAC, progress notes, production, transportation, human rights, fire safety, safety, program policies and procedures, etc.

ASA has a Human Rights Committee that meets on a quarterly basis and reviews behaviors support plans, investigations, incidents and restraints. It also reviews ASA Handbook for individuals and staff trainings. ASA has Human Rights Officers. All staff receive annual training in human rights, DPPC reporting, incident and restraint reporting.

ASA also completes an annual report on critical incidents, sentinel events and grievances.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	10/10	0/10	
Employment and Day Supports	50/52	2/52	
Community Based Day Services			
Critical Indicators	8/8	0/8	
Total	60/62	2/62	97%
2 Year License			
# indicators for 60 Day Follow-up		2	

**Employment/Day Areas Needing Improvement on Standards not met/Follow-up to occur:
From Provider review:**

Indica tor #	Indicator	Issue identified	Action planned to address
L8	Emergency fact sheets are current and accurate and available on site.	Most Emergency fact sheets are in place but some need to be updated.	ASA is currently Reviewing and editing the documentation and will be completed by January 2015.
L60	Data are consistently maintained and used to determine the efficacy of behavioral interventions.	The Behavior data collection did not track the BSP. ASA is currently changing the behavior data sheets to include the data collection on the efficacy of the implementation of the support plan.	The process should be in place and begin by January 2015.

MASTER SCORE SHEET LICENSURE

Organizational: Autism Services Association

Indicator #	Indicator	Reviewed by	Met/Rated	Rating (Met, Not Met, Not Rated)
☞ L2	Abuse/neglect reporting	DDS	1/1	Met
L3	Immediate Action	Provider	-	Met
L4	Action taken	Provider	-	Met
L48	HRC	Provider	-	Met
L65	Restraint report submit	Provider	-	Met
L66	HRC restraint review	Provider	-	Met
L74	Screen employees	Provider	-	Met
L75	Qualified staff	Provider	-	Met
L76	Track trainings	Provider	-	Met
L83	HR training	Provider	-	Met

Employment and Day Supports:

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L1	Abuse/neglect training	I	Provider			-	-	Met
☞ L2	Abuse/neglect reporting	L	Provider			-	-	Met
L4	Action taken	L	Provider			-	-	Met
L5	Safety Plan	L	Provider			-	-	Met
☞ L6	Evacuation	L	DDS			1/1	1/1	Met
L7	Fire Drills	L	Provider			-	-	Met
L8	Emergency Fact Sheets	I	Provider			-	-	Not Met
L9	Safe use of equipment	L	DDS			1/1	1/1	Met
☞ L11	Required inspections	L	DDS			1/1	1/1	Met
☞ L12	Smoke detectors	L	DDS			1/1	1/1	Met
☞ L13	Clean location	L	DDS			1/1	1/1	Met
L15	Hot water	L	Provider			-	-	Met
L16	Accessibility	L	Provider			-	-	Met

Ind. #	Ind.	Loc. or Individ.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L17	Egress at grade	L	Provider			-	-	Met
L20	Exit doors	L	Provider			-	-	Met
L21	Safe electrical equipment	L	Provider			-	-	Met
L22	Clean appliances	L	Provider			-	-	Met
L25	Dangerous substances	L	Provider			-	-	Met
L26	Walkway safety	L	Provider			-	-	Met
L29	Rubbish/com bustibles	L	Provider			-	-	Met
L31	Communication method	I	Provider			-	-	Met
L32	Verbal & written	I	Provider			-	-	Met
Ⓟ L38	Physician's orders	I	DDS			1/1	1/1	Met
L44	MAP registration	L	Provider			-	-	Met
L45	Medication storage	L	Provider			-	-	Met
Ⓟ L46	Med. Administration	I	DDS			3/3	3/3	Met
L49	Informed of human rights	I	Provider			-	-	Met
L50	Respectful Comm.	L	Provider			-	-	Met
L51	Possessions	I	Provider			-	-	Met
L52	Phone calls	I	Provider			-	-	Met
L54	Privacy	L	Provider			-	-	Met
L55	Informed consent	I	DDS			2/2	2/2	Met
L57	Written behavior plans	I	Provider			-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L58	Behavior plan component	I	Provider			-	-	Met
L60	Data maintenance	I	Provider			-	-	Not Met
L63	Med. treatment plan form	I	DDS			1/1	1/1	Met
L64	Med. treatment plan rev.	I	DDS			2/2	2/2	Met
L65	Restraint report submit	L	Provider			-	-	Met
L67	Money mgmt. plan	I	Provider			-	-	Met
L68	Funds expenditure	I	Provider			-	-	Met
L69	Expenditure tracking	I	Provider			-	-	Met
L72	DOL requirements	I	Provider			-	-	Met
L73	DOL certificate	L	Provider			-	-	Met
L77	Unique needs training	I	Provider			-	-	Met
L78	Restrictive Int. Training	L	Provider			-	-	Met
L79	Restraint training	L	Provider			-	-	Met
L80	Symptoms of illness	L	Provider			-	-	Met
L81	Medical emergency	L	Provider			-	-	Met
Ⓟ L82	Medication admin.	L	DDS			1/1	1/1	Met
L85	Supervision	L	Provider			-	-	Met
L86	Required assessments	I	Provider			-	-	Met
L87	Support strategies	I	Provider			-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L88	Strategies implemented	I	DDS			3/3	3/3	Met
#Std. Met/# 50 Indicator							50/52	
Total Score							60/62	
							96.77%	

MASTER SCORE SHEET CERTIFICATION
